



PTO/SB/17 (07-06)

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|--|--|--------------------------|------------------------|
| <p style="text-align: center;">Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <p style="text-align: center;">FEE TRANSMITTAL</p> <p style="text-align: center;">For FY 2005</p> | | Complete if Known | |
| | | Application Number | 10/748,698-Conf. #2127 |
| | | Filing Date | December 29, 2003 |
| | | First Named Inventor | Jyrki Mikkola |
| | | Examiner Name | J. M. Holliday |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Art Unit | 2617 |
| TOTAL AMOUNT OF PAYMENT | | (\$) | 1,690.00 |
| | | Attorney Docket No. | 01329/0200613-US0 |

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 04-0100 Deposit Account Name: _____ Darby & Darby P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| <u>Application Type</u> | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | <u>Fees Paid (\$)</u> |
|-------------------------|-----------------|------------------------------|-----------------|------------------------------|------------------|------------------------------|-----------------------|
| | <u>Fee (\$)</u> | <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u> | <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u> | <u>Small Entity Fee (\$)</u> | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | _____ |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | _____ |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | _____ |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | _____ |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | _____ |

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

| | <u>Small Entity</u> |
|-----------------|---------------------|
| <u>Fee (\$)</u> | <u>Fee (\$)</u> |
| 50 | 25 |
| 200 | 100 |
| 360 | 180 |

| | | | | | | |
|---------------------|---------------------|-----------------|----------------------|----------------------------------|-----------------|----------------------|
| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> | | |
| - | - | = | x | = | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |

HP = highest number of total claims paid for, if greater than 20.

| | | | | |
|----------------------|---------------------|-----------------|----------------------|---|
| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | |
| - | - | = | x | = |

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

- 100 = _____ /50 _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification. \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1252 Extension for response within third month

1801 Request for continued examination (RCE) (see 37 ...)

900.00

790.00

| | | | | |
|-------------------|---|--------------------------------------|--------|-----------------------------|
| SUBMITTED BY | | | | |
| Signature |  | Registration No. (Attorney/Agent) | 47,698 | Telephone (212) 527-7700 |
| Name (Print/Type) | Richard J. Katz | | Date | October 20, 2006 |



Application No. (if known): 10/748,698

Attorney Docket No.: 01329/0200613-US0

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. in an envelope addressed to: **1834731780**

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MS RCE
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on October 20, 2006
Date

Date

Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page)
3rd Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Request for Continued Examination Transmittal (1 page)
Check in the amount of \$1,690.00 13695